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TRANSMITTAL  
FORM

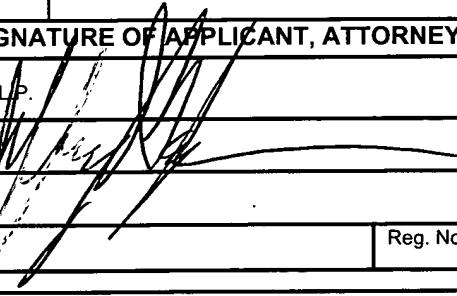
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM  (to be used for all correspondence after initial filing)	Application Number	10/634,211	
	Filing Date	August 5, 2003	
	First Named Inventor	John Campbell Woodard	
	Art Unit	3745	
	Examiner Name	Dwayne J. White	
Total Number of Pages in This Submission	11	Attorney Docket Number	592/4

## ENCLOSURES (Check all that apply)

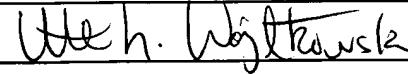
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input checked="" type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Check # 7515 for \$130.00
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Return Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Kaplan & Gilman, L.L.P.		
Signature			
Printed name	Jeffrey I. Kaplan		
Date	December 17, 2004	Reg. No.	34,356

## CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Ute H. Wojtkowski	Date	December 17, 2004

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